Shared Savings Denied Claims- Medical Summary

Health Plan ID:

Health Plan Name:
Community Health Solutions of Louisiana
Health Plan Contact:

Contact Email:
Report Period Start Date:
Report Period End Date:
Submission Date of Report:

2162446

246

Community Health Solutions of Louisiana

2**

2/1/2014

3/15/2014

DHH Denial Code	DHH Denial Description	# of Denied Claim Lines
1	Lack of documentation to support Medical Necessity	4457
2	Prior Authorization was not on file	20132
3	Member has other insurance that must be billed first	3325
4	Claim was submitted after the filing deadline	2231
5	Service was not covered by the BAYOU HEALTH PLAN	8391
6	All Other	607
Total		39143

BAYOU HEALTH Reporting

Document ID: SI173 Revision Date: 11/01/2013

Document Name: Shared Savings Denied Claims

Reporting Frequency: Monthly

Report Due Date: 15th of the month following end of reporting period

File Type: Excel

Subject Matter: Informatics (I)

Shared Savings Denied Claims- 06 Medical Crosswalk

Health Plan ID:

Health Plan Name:
Health Plan Contact:
Contact Email:
Report Period Start Date:

Report Period Start Date:
Report Period End Date:
Submission Date of Report:

| Report Period Start Date: | Period

BAYOU HEALTH Reporting

Document ID: SI173 Revision Date: 11/01/2013

Document Name: Shared Savings Denied Claims

Reporting Frequency: Monthly

2162446

2/1/2014

2/28/2014

3/15/2014

Community Health Solutions of Louisiana

Report Due Date: 15th of the month following end of re

File Type: Excel

Subject Matter: Informatics (I)

Health Plan Denial Code	Description	Total
1	DUPLICATE CHARGE	
61	BENEFIT CODE NOT DETERMINED	15
284	PROVIDER TAXONOMY MISSING/INCOMPLETE/INVALID	480
285	MEMBER MEDICAID ID NUMBER AND NAME DO NOT MATCH	[
294	PLEASE RESUBMIT CHARGES UNDER CORRECT MEDICAID ID.	23
296	HAND WRITTEN CHANGES ARE NOT ALLOWED. RESUBMIT CLAIM CORRECTLY.	27
304	CLAIM INCLUDES SERVICES IN EXCESS OF AUTHORIZED NUMBER OF DAYS/SERVICES/UNITS. RESUBMISSION RE	56
· ·		
Total		607

^{*}Description and totals of all 'Code 6' Denial Codes in Detailed Report.

^{*}Add additional rows as needed.

